



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2359

<b>SERIAL NUMBER</b> 10/533,300	<b>FILING OR 371(c) DATE</b> 10/24/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> 37998-237420
------------------------------------	---	---------------------	-------------------------------	--

**APPLICANTS**

Wolfgang Meder, Weil am Rhein, GERMANY;  
 Martin Wendland, Hannover, GERMANY;  
 Harald John, Hannover, GERMANY;  
 Rudolf Richter, Hannover, GERMANY;  
 Markus Meyer, Hannover, GERMANY;  
 Wolf-Georg Forssmann, Hannover, GERMANY;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/EP03/11799 10/24/2003 *Edk*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

GERMANY 102 51 205.1 10/31/2002 *Edk*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 07/14/2006

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Edk</i> Examiner's Signature _____ Initials _____				

**ADDRESS**

26694

**TITLE**

Human chondroosteomodulin (TIG2), production, and use for the treatment or diagnosis of bone diseases, cartilage diseases, cartilage diseases, obesity, inflammatory diseases, and skin diseases

<b>FILING FEE RECEIVED</b> 720	FEES: Authority has been given in Paper. No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit